

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2009

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,810.00)

Complete if Known

Application Number 10/632,690-Conf. #3636

Filing Date August 1, 2003

First Named Inventor David Fusari

Examiner Name J. R. Swearingen

Art Unit 2445

Attorney Docket No. S1389.70015US00

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account	Deposit Account Number: 23/2825		Deposit Account Name: Wolf, Greenfield & Sacks, P.C.	

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Small Entity Fee (\$)	Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Fee (\$)		
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)	Fee (\$)	Fee (\$)
	52	26
Each independent claim over 3 (including Reissues)	220	110

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
53	- 53 or HP	x	=			
HP = highest number of total claims paid for, if greater than 20.						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
6	- 6 or HP	x	=			
HP = highest number of independent claims paid for, if greater than 3.						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50 =	(round up to a whole number) x	=	= Fees Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 2501 Utility issue fee	1510.00

Other (e.g., late filing surcharge): 1504 Publication fee for early, voluntary, or normal ...

300.00

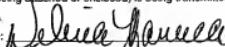
SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	36,149	Telephone	617.646.8000
Name (Print/Type)	Richard F. Giunta			Date	12/22/09

Certificate of Electronic Filing Under 37 CFR 1.8

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: 12/22/09

Signature:  (Delina A. Ranucci)